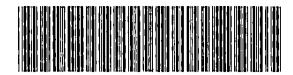
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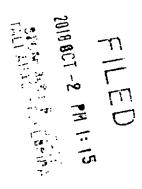
(Re	equestor's Name)	
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

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P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	2 Pointing and Remodeling Co
The enclosed Articles of Amendment and fee are su	ubmitted for filing.
Please return all correspondence concerning this management of the Point of	Name of Contact Person HING COMPOSITION Eight Company Lett. Address Cityl State and Zip Code CLING SCYVICES & MOLMOL COM
E-mail address: (to be use For further information concerning this matter, please for the formation concerning this matter, please for the formation concerning this matter.)	use call:
RCIPIC Parera	at (180) 310-479
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
☐ \$35 Filing Fee	\$43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassec, FL 32301

Articles of Amendment

to

Articles of Incor	prporation	
KER Dointing and Ren	nockling Corp.	
DICOO 19285	filed with the Florida Dept. of State)	
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)) 1
A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	Co". A professional corporation name must contain the	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	Florida	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wit	cith and accept the obligations of the position. Paistered Agent, if changing	. 1フ
	ज ज	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_ /	
Add		/	
Remove		<i>i</i>	
3) Change		- / ———	
Add		<i></i>	
Remove		i	
4) Change			;
Add			
Remove			
5) Change			
Add			
Remove		1	
6) Change			
Add			
Remove		l.	_

If amending or adding additional Article (Attach additional sheets, if necessary).	e <mark>s, enter change(s) here</mark> : (Be specific)
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	NIN
	<i>' </i>
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If an amendment provides for an exchan	nge, reclassification, or cancellation of issued shares,
provisions for implementing the amend	ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	4)/0
	<u></u>
	

The date of each amendment(s) adoption: _	, if other than the
date this document was signed.	9/20/18
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the f State's records.
Adoption of Amendment(s) (C	HECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) approval.
	the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes east for the amo	endment(s) was/were sufficient for approval
by	
(Ve	oting group)
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and shareholder
action was not required. Dated	e incorporators without shareholder action and shareholder
selected, by an inc	rsident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court ry by that fiduciary) (Typed or printed name of person signing)
	(Title of person signing)